Instructions for completing DHMH 4345 (Level I)

Preadmission Screening and Resident Review (PASRR)

Is the individual being admitted to or receiving care within a Medicaid certified nursing or rehabilitative facility?

NO, if the facility is NOT a Medicaid certified, no reason to complete Level I form (DHMH 4345)

YES, regardless of the individual's payment source, complete Level I.

DHMH 4345 (Level I):

https://mmcp.health.maryland.gov/SiteAssets/pages/UCATransition/Level%20I%20ID%20Screen%20Revised%20Jan%2020 16.pdf

Level I (DHMH 4345)

Demographics – must include:

- 1. Name
- 2. Gender
- 3. Date of birth
- 4. Location and address of Individual
- 5. Contact person's name, relationship, and telephone

Note: If Social Security Number or actual/requested NF date is not known the PASRR process can still proceed.

Section A: EXEMPTED HOSPITAL DISCHARGE

- If all questions are answered **YES**, then further screening is **NOT** required and the screener signs and dates bottom of Section A.
- If any question is answered **NO**, the remainder of the Level I form must be completed.
- Note: Observation Units or Emergency Rooms are not considered acute inpatient care.
- SIGNATURE & TITLE. DATE

The person completing Section A must sign and date regardless if remaining sections need to be completed.

Section B: INTELLECTUAL DISABILITY (ID) AND RELATED CONDITIONS

- If any question is answered **YES**; a diagnosis of Intellectual Disability (ID) or Developmental Disability (DD) is either known or suspected.
 - Check YES at the end section of Section B and continue screening in Section C.
- If all questions are answered NO
 - Check **NO** at end of Section B and continue to Section C.
- Some of the most known causes of intellectual disability are Down syndrome, fetal alcohol syndrome, fragile X syndrome, genetic conditions, birth defects, cerebral palsy, and infections that occur before birth; while others happen while a baby is being born or soon after birth. Other causes of intellectual disability do not occur until a child is older; these include, but not limited to, serious head injury, stroke, or certain infections.
- Source: https://www.cdc.gov/ncbddd/developmentaldisabilities/index.html

Section C: MENTAL ILLNESS (MI)

- Information regarding psychiatric hospitalizations and treatment within the last 2 years <u>must be obtained by the screener</u> to answer correctly answer all 3 questions in Section C.
- Neurocognitive disorders are NOT considered mental illness(s).
- Examples of significant disruption to normal living are, but not limited to;
 - Interpersonal problems: <u>serious difficulty</u> interacting appropriately and communicating effectively with other persons or avoidance of basic interpersonal relationship(s), history of

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- altercations, multiple evictions or expulsions from treatment programs, unable to maintain employment due to disruptive behavior
- Concentration problems: <u>serious difficulty</u> in sustaining focused attention for a long enough period to permit the completion of tasks commonly found in work settings or structured activities occurring in school or home settings, inability to complete <u>simple</u> tasks within an established time period or makes frequent errors due to lack of concentration, or requires extensive assistance in the completion of common tasks.
- Problems w/adaptation: <u>serious difficulty</u> in adapting to typical changes in circumstances associated with work, school, family, or social interaction. Changes can manifest agitation, exacerbated signs and symptoms associated with the mental illness (such as delusions), or withdrawal from the situation, or requires intervention by the mental health or judicial system.
- If all 3 questions are answered YES, the individual is considered to have a serious mental illness (SMI).
- According to National Institute of Mental Health SMI is defined as a mental, behavioral, or emotional
 disorder resulting in serious functional impairment, which substantially interferes with or limits one
 or more major life activities. SMI diagnoses include but not limited to schizophrenia, schizoaffective
 disorder, severe bipolar disorder, personality disorders, obsessive-compulsion disorders, posttraumatic stress disorder (PTSD), or major depression disorder.
- Source: https://www.nimh.nih.gov/health/topics/index.shtml

Section D: CATEGORICAL ADVANCE GROUP DETERMINATIONS (CAGD)

- CAGD is utilized to expediate NF admissions for specific circumstances.
- If any category is selected, a CAGD Evaluation Report supplemental form (DHMH 4345b) must be completed and submitted with Level I.
- CAGD is not an "EXEMPTED HOSPITAL DISCHARGE".
- Admission under a CAGD does not indicate the individual meets level of care (LOC) eligibility for Medicaid.
- Referral to AERS for Level II is required when CAGD is completed for categories #4 per Maryland Medical Assistance Program Nursing Home Transmittal No. 249 and Hospital Transmittal No. 228, dated June 30, 2014.
- If questions 1, 2, or 3 are checked "Yes," or if all answers in Part D are "No," the individual must be referred to AERS for a Level II evaluation, as the individual may benefit from Specialized Services per Federal Regulations. Source: https://ecfr.io/Title-42/Section-483.130
 - (f) The State mental health and intellectual disability authorities may make categorical determinations that specialized services are not needed in the provisional, emergency and respite admission situations identified in § 483.130(d)(4)-(6). In all other cases, except for § 483.130(h), a determination that specialized services are not needed must be based on a more extensive individualized evaluation under § 483.134 or § 483.136.

Certification: NAME & TITLE, DATE

The person filling out the Level I must provide their name, title, and date of completion.

Last Section: POSITIVE ID SCREENS NOT COVERED UNDER CATEGROICAL DETERMINATIONS

- Examples of appropriate use by AERS:
 - o Admission to NF during COVID-19 PASRR Waiver.
 - o After Resident Review PASRR process completed.